

County: Douglas  
VILLA MARINA HEALTH/REHABILITATION  
35 NORTH 28TH STREET

Facility ID: 2120

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SUPERIOR 54880 Phone: (715) 392-3300  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 72  
Total Licensed Bed Capacity (12/31/01): 72  
Number of Residents on 12/31/01: 71

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 69

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		38.0	
Home Health Care	No					1 - 4 Years		38.0	
Supp. Home Care-Personal Care	No					More Than 4 Years		23.9	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.8				
Day Services	No	Mental Illness (Org./Psy)	8.5	65 - 74	8.5				
Respite Care	No	Mental Illness (Other)	4.2	75 - 84	28.2			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.7	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.9	Full-Time Equivalent			
Congregate Meals	No	Cancer	5.6			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	12.7		100.0	(12/31/01)			
Other Meals	Yes	Cardiovascular	18.3	65 & Over	97.2				
Transportation	No	Cerebrovascular	14.1			RNs		9.3	
Referral Service	No	Diabetes	2.8	Sex	%	LPNs		12.1	
Other Services	No	Respiratory	1.4			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	32.4	Male	18.3	Aides, & Orderlies			
Mentally Ill	Yes			Female	81.7				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

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#### Method of Reimbursement

		Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care				
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	4	10.8	132	0	0.0	0	1	4.0	153	0	0.0	0	0	0.0	0	5	7.0
Skilled Care	9	100.0	256	32	86.5	114	0	0.0	0	24	96.0	143	0	0.0	0	0	0.0	0	65	91.5
Intermediate	---	---	---	1	2.7	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		37	100.0		0	0.0		25	100.0		0	0.0		0	0.0		71	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
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Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	4.8	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	0.0	Bathing	7.0	87.3	5.6	71
Other Nursing Homes	2.1	Dressing	8.5	85.9	5.6	71
Acute Care Hospitals	93.2	Transferring	12.7	81.7	5.6	71
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	12.7	81.7	5.6	71
Rehabilitation Hospitals	0.0	Eating	31.0	59.2	9.9	71
Other Locations	0.0	*****				
Total Number of Admissions	146	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.6	Receiving Respiratory Care	1.4	
Private Home/No Home Health	45.6	Occ/Freq. Incontinent of Bladder	62.0	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	10.9	Occ/Freq. Incontinent of Bowel	19.7	Receiving Suctioning	0.0	
Other Nursing Homes	2.7			Receiving Ostomy Care	4.2	
Acute Care Hospitals	15.6	Mobility		Receiving Tube Feeding	1.4	
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	8.5	Receiving Mechanically Altered Diets	25.4	
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	25.2	With Pressure Sores	2.8	Have Advance Directives	74.6	
Total Number of Discharges		With Rashes	1.4	Medications		
(Including Deaths)	147			Receiving Psychoactive Drugs	50.7	

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.8	82.7	1.16	85.1	1.13	84.3	1.14	84.6	1.13
Current Residents from In-County	97.2	82.1	1.18	80.0	1.21	82.7	1.18	77.0	1.26
Admissions from In-County, Still Residing	17.8	18.6	0.96	20.9	0.85	21.6	0.82	20.8	0.86
Admissions/Average Daily Census	211.6	178.7	1.18	144.6	1.46	137.9	1.53	128.9	1.64
Discharges/Average Daily Census	213.0	179.9	1.18	144.8	1.47	139.0	1.53	130.0	1.64
Discharges To Private Residence/Average Daily Census	120.3	76.7	1.57	60.4	1.99	55.2	2.18	52.8	2.28
Residents Receiving Skilled Care	98.6	93.6	1.05	90.5	1.09	91.8	1.07	85.3	1.16
Residents Aged 65 and Older	97.2	93.4	1.04	94.7	1.03	92.5	1.05	87.5	1.11
Title 19 (Medicaid) Funded Residents	52.1	63.4	0.82	58.0	0.90	64.3	0.81	68.7	0.76
Private Pay Funded Residents	35.2	23.0	1.53	32.0	1.10	25.6	1.38	22.0	1.60
Developmentally Disabled Residents	0.0	0.7	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	12.7	30.1	0.42	33.8	0.37	37.4	0.34	33.8	0.38
General Medical Service Residents	32.4	23.3	1.39	18.3	1.77	21.2	1.53	19.4	1.67
Impaired ADL (Mean)	46.2	48.6	0.95	48.1	0.96	49.6	0.93	49.3	0.94
Psychological Problems	50.7	50.3	1.01	51.0	1.00	54.1	0.94	51.9	0.98
Nursing Care Required (Mean)	4.6	6.2	0.74	6.0	0.76	6.5	0.70	7.3	0.62